Application	or Docket	Number
, application	OI DOCKEL	Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

		····										
CLAIMS AS FILED - PART (Column 1)					ımn 2)		MALL E	NTITY	OR	•	R THAN ENTITY	
TOTAL CLAIMS			72					RATE	FEE	7	RATE	FEE
FOR			NUMBER FILED N		NUME	NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS 32			32 m	32 minus 20= * 17				X\$ 9=		OR	X\$18=	214
INDEPENDENT CLAIMS			\ \ m	inus 3 = * }				X43=		7	X86=	177/
MULTIPLE DEPENDENT CLAIM PRESENT						-			OR		170	
* If the difference in column 1 is less than zero, enter "0" in column 2					' L	+145=		OR	+290=			
•	CLAIMS AS AMENDED - PART II							TOTAL	<u> </u>	OR	TOTAL	<u> </u>
	·	(Column 1)	MENDE	PAR - C Colum)		(Column 3)		SMALL	ENTITY	OR	OTHER SMALL	
	i	CLAIMS	T	HIGHE		1	1 —			J		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	##		=	<u> </u> -	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MI		PENDENT	CLAIM			+145=		1	+290=	
	, ,						L	T173-		OR	+230 -	
							۸۲	TOTAL DIT. FEE		OR ,	TOTAL ADDIT, FEE	
	3	(Column 1)		(Colum	D 3)	(Column 3)	. ~L	DII. FEE		<i></i>	NUUII. FEEI	
T		CLAIMS	T:	HIGHE		(Column 3)						
m		REMAINING	j	NUMB		PRESENT	1 1		ADDI-	1 1	2	ADDI-
누ㅣ		AFTER	İ	PREVIO	_	EXTRA RATE	RATE	TIONAL	li	RATE	TIONAL	
<u> </u>	· · · · · · · · · · · · · · · · · · ·	AMENDMENT		PAID F	OR			1	FEE			FEE
AMENDMENT	Total	*	Minus	**	,	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	PENDENT	CLAIM		 -					
							L	+145=		OR	+290=	•
						AD	TOTAL DIT. FEE		OR	TOTAL DDIT. FEE		
		(Column 1)		(Colum	n 2)	(Column 3)	•					, ,
	`	CLAIMS		HIGHE								
ပ		REMAINING		NUMBI		PRESENT			ADDI-		ı	ADDI-
		AFTER		PREVIOL		EXTRA	f	RATE	TIONAL		RATE	TIONAL
¥⊦		AMENDMENT		PAID F	DR		L		FEE	L		FEE
۵ ا	Total	*	Minus	**		=	,	(\$ 9=		OR	X\$18=	
5 L	Independent		Minus	***		=		K43=		OR	X86=	
	FIRST PRESE	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			` —							
+145							145=		OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE												
""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												